

Governor's Commission for a Drug Free Indiana

A Division of the



Comprehensive Community Plan

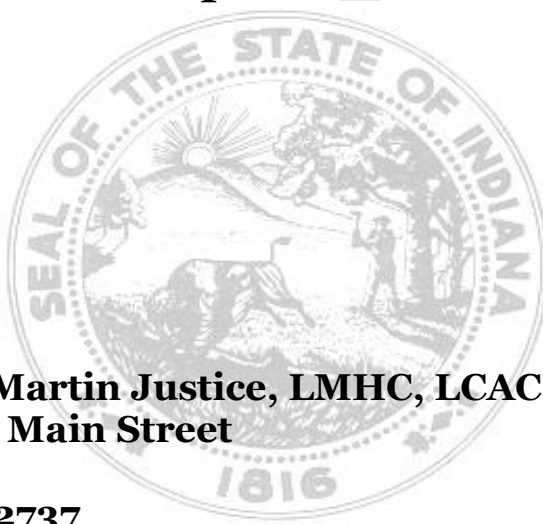
County: Switzerland

LCC: Switzerland County Awareness Team

Date Due: October 2013

Date Submitted: January 2014

New Plan ☐ **Plan Update** ☒



LCC Contact: C. Martin Justice, LMHC, LCAC

Address: 205 W. Main Street

City: Vevay

Phone: 812/427-2737

Email: switzcoawarenessteam@outlook.com

County Commissioners: Switzerland County Commissioners

Address: Courthouse on Main

City: Vevay

Zip Code: 47043

Plan Summary

Mission Statement: Switzerland County Awareness Team (SCAT) is committed to the development of positive lifestyles for all Switzerland County residents and attempts to achieve this by: 1) networking with local agencies to increase awareness of substance abuse issues; 2) providing support for prevention, intervention and treatment programs and 3) by assisting local justice and law enforcement with tools for enforcement.

History: In Switzerland County, the LCC is known as the Switzerland County Awareness Team or SCAT. SCAT began in 1990 largely due to the efforts of a local judge, Judge John Mitchell. The initial membership was comprised of Judge Mitchell, two educators from the local extension office, a parent and a school principal. One of these founding members, Elizabeth Jones still remains active in SCAT.

SCAT prides itself on being a grassroots effort and has had an active membership that includes people interested in the mission of the organization and who have special investment in Switzerland County. Currently the membership includes people from the local mental health center, a nearby hospital, the extension office, a local church and area schools, to name a few. The current chairperson is a program director from the mental health center who manages the substance abuse and mental health services in Switzerland County. Because members live and/or work in the community, they keep pulse on the community's changing needs and can gear their efforts accordingly.

Switzerland County consists of 221 square miles of beautiful rural country that is separated from Kentucky by the Ohio River. There are numerous historic homes along the riverside in Vevay, which is one of only two towns in Switzerland County. The only traffic light in Switzerland County, in Vevay, is a recent addition which illustrates their smallness and roots to their past, a quieter life. The county's population rose from 9065 according to the 2000 census to 9508 in 2005, an increase of almost 5%. According to the 2006 census data, there was further growth to 9568. Of the residents 199 residents are under the age of 26 years old.

Of the 9568 residents, 2006 reports show 119 adults and children facing addiction and 41 women with addiction issues and pregnant. Indiana Family and Social Service data for period July 2007 to June 2008, reports that there were 54 people with addiction (including gambling) who were treated by the mental health center and another 7 who had addiction and a mental illness.

The majority of the residents (98.8%) are Caucasian with others being African American, Native American and Hispanic. There is also a small Amish population in the county. Unemployment figures for 2003 show an unemployment rate of 5.9% with an average income of \$18,040 per household according to information from the Indiana Youth Institute. In 2002 about 14% of residents were considered to be living in poverty. Farming, service and retail are some of the areas of employment. However, in the past five years, the largest change has been the additional of Belterra Casino on the river. Belterra

is now the largest employer in the area and has brought new comers to the community, both those who work at the casino and those who come to play. Resources from the casino were instrumental in the creation of the new YMCA which opened its doors to residents in 2002 and offered scholarships so membership was possible independent of a family's income. In the county, there are two elementary schools, a middle school and a high school as well as several churches and other social service agencies.

SCAT members utilize their knowledge of community issues to address concerns that are aligned with the LCC's mission. The resources for addressing problems emanate from the system set up by the legislation for LCC;s. Each year, the county auditor receives funds collected by the clerk of courts from fines assessed for drug and alcohol related offenses. A portion of these funds are allocated to the LCC. In 1994, SCAT used most of its funds to support a paid coordinator to lead SCAT's efforts. While this was effective at this time, the decision was made to create leadership within the volunteer membership in order to dedicate 100% of funding for programs to reduce drug and alcohol abuse and their effects on the community. In October of each year, SCAT solicits grant proposals. The grants committee reviews the proposals and makes a recommendation to fund those which best meet the objective of the Comprehensive Community Plan. These recommendations are passed on to the County Commissioners and the County Council who have final approval as to which projects will be funded. Funds must be distributed so that 25% of the funds are distributed in each of the three areas: prevention/education, treatment/intervention and criminal justice. The remaining 25% may be used for administrative purposes or may be placed in any one of the three previously list categories.

In 2005, with urging from SCVTA, the local school corporation agreed to participate in the IPRC Alcohol, Tobacco and Drug Use Survey. The survey was given to all students in grades 6 through 12 and resulted in 619 usable surveys. The finding were very valuable to SCAT and led to a decision to focus specifically on use of tobacco, alcohol, and marijuana because local rates of use of these substances were higher than state rates. The overall plan for SCAT is to develop strategies to reduce use among youth and to build an active and diverse coalition to promote substance abuse awareness.

For the past two years SCAT has submitted a grant proposal for the Drug Free Community Support program, but the attempt has been unsuccessful in securing funding. It is our intent to address issues raised by the reviewers to best position ourselves for future grants. Significant efforts are needed to continue to build capacity and the coalition in the community.

Summary of the Comprehensive Community Plan: Over the next three years SCAT will focus on the following issues throughout Switzerland County:

- (1) Use of gateway drugs by minors exceed state average.
- (2) Heroin continues to be prevalent in the area.
- (3) There is a lack of education/awareness of ATOD issues throughout Switzerland County.

Membership List

County LCC Name: Switzerland County Awareness Team

#	Name	Organization	Race	Gender	Category
1	Nadja Boone	Kings Daughters Hospital	C	F	Medical
2	Paula Goodpastor	SIEOC	C	F	Prevention
3	Casie Jesop	Switzerland County Schools	C	F	Education
4	Ginger Furnish	Purdue Extension	C	F	Prevention
5	Kyle Weaver	Purdue Extension	C	M	Prevention
6	Amber Johnson	SIEOC	C	F	Prevention
7	Elissa Pogue	ASAP Center	C	F	Prevention
8	Corinna Davies	Community mental Health Center	C	F	Treatment
9	Elizabeth Jones	Switzerland County Schools	C	F	Education
10	Elixabeth Auxier	Tobacco Coalition	C	F	Prevention
11	Kathleen Branham	Community Partners	C	F	Treatment
12	James Richards, III	Vevay Police	C	M	Law Enforcement
13	Tina Keller	Safe Passage	C	F	Treatment
14	Eric Cole	YMCA	C	M	Prevention
15	Roy Leap	Switzerland County Sheriff's Department	C	M	Law Enforcement
16	David Todd	Switzerland County School Corporation	C	M	Education
17	Marla Edwards	Switzerland County High School	C	F	Education
18	Pam Acton	Switzerland County	C	F	Prevention

		Community Foundation			
19	Debbie Allen	Salvation Army	C	F	Treatment
20	Richard Lock	Switzerland County Sheriff's Department	C	M	Law Enforcement
21	Martin Justice	CMHC	C	M	Treatment
22	Deb Rantz	Head Start	C	F	Education
23	Tina Leas	CMHC	C	F	Treatment
24	Jeff Theetge	Switzerland County Probation	C	M	Justice
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Problem Identification

A. Problem Statement #1: Use of gateway drugs by minors exceeds state average.

B. Supportive Data:

1. Monthly alcohol use by all grades who participated in 2012 IPRC survey was higher than the state average. (Data by grade is 6th: local – 13.6% vs. state – 4.7%; 8th: local – 25.7% vs. state – 16.5%; 9th: local – 46.2% vs. 22.4%; and 11th: local – 51.4% vs. state – 31.1%.)
2. Monthly use of smokeless tobacco products is above the state average as reported by those students participating in the 2012 IPRC Survey. (Data by grade is 6th: local – 6.8% vs. state – 1.0%; 8th: local – 11.9% vs. state – 3.3%; 9th: local – 19.2% vs. 5.6%; and 11th: local – 22.9% vs. state – 8.4%.)
3. The rate of monthly cigarette use as reported by students who participated in the 2012 IPRC Survey was above the state average in all classes. ((Data by grade is 6th: local – 5.8% vs. state – 2.3%; 8th: local – 15.8% vs. state – 9.7%; 9th: local – 23.1% vs. 12.7%; and 11th: local – 34.3% vs. state – 19.0%.)
4. According to the 2012 IPRC survey data students reported 30 day Marijuana use higher than the state average in all grades surveyed. (Data by grade is 6th: local – 1.9% vs. state – 1.3%; 8th: local – 8.9% vs. state – 8.0%; 9th: local – 17.3% vs. 11.5%; and 11th: local – 17.1% vs. state – 15.8%.)
5. The number of minors that access tobacco services (TEG) continues to see a large number of youth according to the Switzerland County Tobacco Coordinator; in 2011 there were 47 who participated in the program and to date in 2012 there have been 31 participate.
6. According to the 2010 Centers for Disease Control and Prevention, Behavior Risk Factor Surveillance Survey the state of Indiana ranks 10th (21.2%) in the percentage of adult smoking rates and continues to be above the national average (17.2%).
7. A Vevay Police Officer reported that OWI arrests have significantly increased over the past two years.
8. In 2011 and to date in 2012 there were 264 Switzerland County residents whom received services from CMHC. Of those who received these services 94 or 35.61% reported using alcohol, 66 or 25%% reported using marijuana and 57 or 21.59% reported tobacco use.
9. In 2011 there were 0 youth that received specific Substance Use Services treatment and 2 youth have received these services to date in 2012 as reported by CMHC.

End of Year 1 Update:

1. The schools only participate in the IPRC every other year, thus there is no new data to share.
2. The schools only participate in the IPRC every other year, thus there is no new data to share.

3. The schools only participate in the IPRC every other year, thus there is no new data to share.
4. The schools only participate in the IPRC every other year, thus there is no new data to share.
- 5.
6. This data has not changed.
7. Law enforcement continues to report an increase.
8. CMHC reports an overall decline in individuals seeking services in 2013.
9. CMHC reports 4 youth were seen in 2013 with specific substance diagnosis.

End of Year 2 Update:

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Final Update (end of Year 3):

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C. Goals:

1. By 2015, see a decrease of monthly of gateway drugs among youth by at least 5% as reported in the IPRC Survey Data.

End of Year 1 Annual Benchmarks:

1. The schools only participate in the IPRC every other year, thus there is no new data to share.

End of Year 2 Annual Benchmarks:

- 1.

Final Report (end of Year 3):

- 1.

D. Objectives:

1. Educate youth about effects/dangers of alcohol, tobacco and marijuana.
2. Educate parents/community members about effects/dangers of alcohol, tobacco and marijuana.
3. Utilize treatment grant funds to provide intervention programs and/or individual/family counseling to youth abusing alcohol.
4. Utilize grant funds to support law enforcement obtaining equipment and/or overtime patrol to increase police presences in hopes that this would lead more teens to substance abuse treatment.
5. Utilize prevention programs such as Life Skills to educate youth.
6. Support tobacco prevention/cessation efforts through the local tobacco initiative targeting specifically TAP & TEG.

End of Year 1 Update:

1. Tobacco prevention programs continued in 2013, though will cease in 2014.
2. SCAT utilized local radio time to accomplish this. We also completed a Prime for Life training, open to the public.
3. As reported above, four youth presented for treatment.
4. Funds were used for equipment.
5. Tobacco prevention programs provided prevention/education.
6. Tobacco prevention programs continued in 2013, though will cease in 2014

End of Year 2 Update:

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Final Update (end of Year 3):

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A. Problem Statement #2: Heroin continues to be prevalent in the area.**B. Supportive Data:**

1. Three counties bordering Switzerland County have identified a sharp rise in heroin use and death by overdose, reported by Dearborn, Jefferson, & Ripley County LCCs.
2. The rate of monthly Heroin use by 6th grade (Local – 1.0%/State - 0.2%), 8th grade (Local – 2.0%/State – 0.5%), & 11th grade (Local – 5.7%/State – 0.7%) exceed the state average according to the 2012 IPRC survey results.
3. Local law enforcement reported that a shift is starting to be seen in the community from RX use to Heroin use due to its availability and cost. They stated they also feel this shift is occurring due to people becoming addicted to their RX medications and when they run out or no longer can obtain a RX for it; they switch to Heroin use due to its availability.
4. In 2011 and to date in 2012 there were 264 Switzerland County residents whom received services from CMHC. Of those who received services 7 or 2.65% reported using heroin and 34 or 12.88% reported opiate and other synthetic drug use.

End of Year 1 Update:

1. Dearborn and Jefferson continue to report an increase.
 2. **The schools only participate in the IPRC every other year, thus there is no new data to share.**
2. Law enforcement reports an increase in use of agonist medication and Heroin
3. **In 2013, CMHC reports 9 clients reported using heroin and 32 reported using opiates.**

End of Year 2 Update:

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Final Update (end of Year 3):

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C. Goals:

1. **By 2015 reduce monthly heroin use as reported by students on the IPRC Survey.**

2. Increase the number of residents seeking treatment for heroin addiction by 50% by 2015.

End of Year 1 Annual Benchmarks:

1. The schools only participate in the IPRC every other year, thus there is no new data to share.
2. CMHC reports an increase of two consumers.

End of Year 2 Annual Benchmarks:

- 1.
- 2.

Final Report (end of Year 3):

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D. Objectives:

1. Fund grants that provide education to youth about substance abuse.
2. Fund grants that provide treatment and other interventions to youth and families struggling with substance abuse issues.
3. Hire a paid coordinator to educate the community about drug abuse, specifically heroin use.
4. Fund grants to law enforcement that focus on apprehension of heroin users and those who are bringing heroin into the community.
5. Create awareness of the signs and dangers of heroin use throughout the community.

End of Year 1 Update:

1. Funded tobacco prevention and Purdue leadership grants
2. Funded treatment provided by CMHC
3. In 2013 there was a change in coordinator.
4. Funded law enforcement grants.
5. Obtained a grant and worked with law enforcement/courthouse to hang signs in the community.

End of Year 2 Update:

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Final Update (end of Year 3):

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A. Problem Statement #3: There is a lack of education/awareness of ATOD issues throughout Switzerland County.**B. Supportive Data:**

1. According to the 2012 IPRC survey data those youth that feel there was some chance, a pretty good chance or a very good chance of being seen as cool at school if they drank alcohol were 8th grade – 31.7%, 9th grade – 30.7% and 11th grade – 51.4%.
2. According to the 2012 IPRC survey data those youth that feel there was some chance, a pretty good chance or a very good chance of being seen as cool at school if they smoked marijuana were 9th grade – 25% and 11th grade – 45.7%.
3. According to the 2012 IPRC survey data those youth that reported having no best friends committed to staying drug free were 6th grade – 26.2%, 8th grade – 33.7%, 9th grade – 34.6% and 11th grade – 37.1%.
4. Those students reporting it was only a little bit wrong or not wrong at all to consume alcohol were 9th grade - 36.6% & 11th grade – 42.9% according to the 2012 IPRC survey data.
5. Those students reporting it was only a little bit wrong or not wrong at all to smoke marijuana were 9th grade - 34.6% & 11th grade – 37.2% according to the 2012 IPRC survey data.
6. The 2012 IPRC survey data shows that 17.9% of 9th graders & 20% of 11th graders report that adults in their community feel that youth consumption of alcohol alcohol is not at all wrong.
7. Few regular attendees at the SCAT meetings are from Switzerland County. The majority of those present at the meetings serve the county, but do not reside in Switzerland County nor work in the county on a routine basis.
8. In 2011 there were 16 Adults that received specific Substance Use Services treatment and 21 have received these services to date in 2012 as reported by CMHC.

End of Year 1 Update:

1. **The schools only participate in the IPRC every other year, thus there is no new data to share.**
2. **The schools only participate in the IPRC every other year, thus there is no new data to share.**
3. **The schools only participate in the IPRC every other year, thus there is no new data to share.**
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5. **The schools only participate in the IPRC every other year, thus there is no new data to share.**
6. **The schools only participate in the IPRC every other year, thus there is no new data to share.**
7. SCAT gained two new community members.
8. C MHC reports a decline in services provided.

End of Year 2 Update:

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Final Update (end of Year 3):

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C. Goals:

1. Engage at least one new partner per year to assist in spreading the SCAT message.
2. Starting in 2013, have at least one article per quarter about SCAT and ATOD in the local media.

End of Year 1 Annual Benchmarks:

1. Engaged two new community members.
2. This goal was unknown by the executive committee. As we were reminded of it, we were able to utilize one radio spot.

End of Year 2 Annual Benchmarks:

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Final Report (end of Year 3):

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D. Objectives:

1. Participate in National Awareness campaigns such as Red Ribbon Week, Great American Smoke Out, etc.
2. Submit at four articles to the local media (1 per quarter).
3. Implement the use of electronic media.
4. Partner with SADD at SCHS to engage youth in education and awareness.

5. Create awareness around responsible drinking.
6. Educate public on consequences of specific alcohol and drug related charges.
7. Support evidence-based programming that provides prevention and intervention to students during school, financially and with resources.
8. Support with resources, positive youth activities and monitoring programs that offer positive lifestyle choices.

End of Year 1 Update:

1. The schools participated
2. Utilized one radio spot.
3. SCAT is not using any electronic media. We will consider this in 2014.
4. SCHS was not interested.
5. Efforts toward this were in the Prime for Life training.
6. Efforts toward this were in the Prime for Life training
7. Gave grant to CMHC to purchase EBP.
8. Supported Purdue Leadership program.

End of Year 2 Update:

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Final Update (end of Year 3):

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Please attach the County's Fiscal Report for review!

Next Annual Update Due: October 2013

Next Comprehensive Community Plan Due: October 2015

Date of Community Consultant Review:

Disclaimer:

You agree that the information provided within this Plan is subject to the following Terms and Conditions. These Terms and Conditions may be modified at any time and from time to time; the date of the most recent changes or revisions will be established by the Commission and sent electronically to all Local Coordinating Councils.

Terms and Conditions:

The information and data provided is presented as factual and accurate. I hereby acknowledge that I can be asked to submit proper documentation regarding the data submitted within the Plan. Failure to do so could result in a "denied approval" by the Commission under IC 5-2-6-16.

The Local Drug Free Communities Fund must be spent according to the goals identified within the plan. I hereby acknowledge that I can be asked to submit proper documentation regarding funds that are collected, allocated, and disbursed within the county. Failure to do so could result in a "denied approval" by the Commission under IC 5-2-6-16.

Initials: KLS